ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
	ha G		9/11/80
FEE DETERMINATION	100		17
O.I.P.E. CLASSIFIER		h 1/5	7/15/30
FORMALITY REVIEW		11400	1000
RESPONSE FORMALITY REVIEW		(COST)	1020

INDEX OF CLAIMS

•	Rejected	N	Non-elected
=	Allowed	1	Interference
_	(Through numeral) Canceled	Α	Appeal
÷	Restricted	0	Ohiected

Tour Days	Data Data	Courie Date
Claim Date	Claim Date	Claim Date
Final Original	Final	Final Original
	<u> </u>	
	51	101
2	52	102
3 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	53	103
4	54	104
5	55	106
6	56	106
7	57	107
(8)	58	108
1 9 1	59	109
Treal	60	110
	61	111
1 (2)	62	112
	63	113
14 14	64	114
15	65	115
16	66	116
17	67	117
18	68	118
19	69	119
20	70	120
21	71	121
	72	
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	74	123
25	75	125
26	76	126
27	77	127
28	78	128
29	79	129
30	80	130
31	81	131
32	82	132
33).	83	133
(34	84	134
j 35	85	135
36	86	136
37	87	137
38	88	138
39	89	139
40	90	140
41	91	141
42	92	142
43	93	143
44	94	144
45	95	145
46	96	146
47	97	147
48	98	148
49	99	149
50	hod	150

If more than 150 claims or 10 actions staple additional sheet here

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